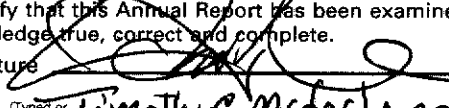


No. C109603	Annual Report Form 1995 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct		TIMOTHY MCFARLANE 2215 WALTMAN																			
	TNT CUSTOM PAINT & DRYWALL, TIMOTHY MCFARLANE 2215 WALTMAN MERIDIAN ID 83642		MERIDIAN ID 83642 3. Organized Under the Laws of: ID C109608																			
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																						
<table border="0"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Timothy C. McFarlane</td> <td>2215 WALTMAN ST</td> <td>Meridian</td> <td>ID</td> <td>83642</td> </tr> <tr> <td>Secretary</td> <td>Tempe D. McFarlane</td> <td>2215 WALTMAN ST</td> <td>Meridian</td> <td>ID</td> <td>83642</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Timothy C. McFarlane	2215 WALTMAN ST	Meridian	ID	83642	Secretary	Tempe D. McFarlane	2215 WALTMAN ST	Meridian	ID	83642
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5. NATURE OF BUSINESS PAINTING & DRYWALL		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature  Date 07/13/96 Name (Typed or Printed) Timothy C. McFarlane Title Pres.																				

ISSUED: 07-06-1995

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